

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
REAGAN	MICHAEL	JOSEPH	[REDACTED]
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
[REDACTED]			OPTIONAL: E-MAIL ADDRESS

1. Office, Agency, or Court

Name of Office, Agency, or Court:

County of Solano

Division, Board, District, if applicable:

Board of Supervisors

Your Position:

Supervisor, District 5

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: See Attached

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ County of Solano

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____
(Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 3

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☒ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached
Income - Gifts

Schedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and correct.

I certify
of _____

Date: _____

Signature: _____

[REDACTED SIGNATURE]

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Michael Joseph Reagan

► STREET ADDRESS OR PRECISE LOCATION

730 Ruby Dr.

CITY

Vacaville

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE D
Income - Gifts

Name

Michael Joseph Reagan

► NAME OF SOURCE

Genentech

ADDRESS (Business Address Acceptable)

1 DNA Way, South San Francisco, CA 94080

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Biotechnology

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 23 / 09	\$ 95.00	Luncheon & Program
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Solano Midnight Sun Foundation

ADDRESS (Business Address Acceptable)

198 Dobbins St., Suite D, Vacaville, CA 95688

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Non-Profit, benefits breast cancer patients

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 26 / 09	\$ 300.00	2/tktDinner & Program
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Republic Services Inc.

ADDRESS (Business Address Acceptable)

2901 Industrial Ct. P.O. Box B, Fairfield, CA 94533

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Waist Management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 01 / 09	\$ 200.00	2/tkts Authors Lunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

California Contractors Alliance

ADDRESS (Business Address Acceptable)

P.O. Box 601, Benicia, CA 94510

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Building Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 09 / 09	\$ 40.00	Luncheon
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Carpenter - Central District

ADDRESS (Business Address Acceptable)

265 Hegenberger RD., Suite 200, Oakland, CA94621

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Organized Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 11 / 09	\$ 50.00	Moose Feed-Lunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Bayseng Spice Company

ADDRESS (Business Address Acceptable)

296 Camino Sobrente, Orinda, CA 94563

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Wholesale Organic Bay Leaves

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 11 / 09	\$ 50.00	Bay Leaves Wreath
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

STATEMENT OF ECONOMIC INTEREST

- **Solano County Board of Supervisors**

Jurisdiction: County

Position: Supervisor, 5th District

Address: 675 Texas St., Fairfield, CA 94535

CG

Delta Protection Commission

Jurisdiction: State

Position: Commissioner

Address: P.O. Box 530; Walnut Grove, CA 95690

CG

Bay Conservation and Development Commission

Jurisdiction: State

Position: Commissioner

Address: 50 California Street; Suite 2600; San Francisco, CA 94111

CG

Yolo-Solano Air Quality Management Board

Jurisdiction: Multi-County

Position: Director

Address: 1947 Galileo Court, Suite 103; Davis, CA 95618

CG

Fouts Springs Youth Facility Board of Directors

Jurisdiction: Multi-County

Position: Member

Address: 1313 Fouts Springs Road; P.O. Box 189; Stonyford, CA 95979

- **Solano County Water Agency**

Jurisdiction: Multi-County

Position: Director

Address: P.O. Box 349; Elmira, CA 95625-0349

CG

Winters Branch Library Financing Authority

Jurisdiction: Multi-County

Position: Director

Address: Yolo County Library, 226 Buckeye St.; Woodland, CA 95695

- **Solano County Local Agency Formation Commission**

Jurisdiction: Solano County

Position: Member

Address: 744 Empire Street, Suite 216; Fairfield, CA 94533

- **East Vallejo Fire Protection District**

Jurisdiction: Solano County

Position: Director

Address: 675 Texas Street; Fairfield, CA 94533

- **Solano County Transportation Authority**
Jurisdiction: Solano County
Position: Member
Address: One Harbor Center; Suite 130; Suisun City, CA 94585
- **In-Home Supportive Services Public Authority**
Jurisdiction: Solano County
Position: Director
Address: 675 Texas Street; Fairfield, CA 94533